```
FEDERAL BUREAU OF INVESTIGATION
FOI/PA
DELETED PAGE INFORMATION SHEET
FOI/PA# 1346919-0
Total Deleted Page(s) = 85
Page 11 ~ b6; b7C;
Page 12 ~ b6; b7C; b7D; b7E;
Page 13 ~ b6; b7C; b7D; b7E;
Page 14 ~ b6; b7C; b7D; b7E;
Page 15 ~ b6; b7C; b7D;
Page 16 ~ b6; b7C; b7D;
Page 17 ~ b6; b7C; b7D;
Page 18 ~ b6; b7C; b7D;
Page 19 ~ b6; b7C; b7D;
Page 20 ~ b6; b7C; b7D;
Page 21 ~ b6; b7C; b7D;
Page 22 ~ b6; b7C; b7D;
Page 23 ~ b6; b7C; b7D;
Page 24 ~ b6; b7C; b7D;
Page 25 ~ b6; b7C; b7D;
Page 26 ~ b6; b7C; b7D;
Page 27 ~ b6; b7C; b7D;
Page 28 ~ b6; b7C; b7D;
Page 29 ~ b6; b7C; b7D;
Page 30 ~ b6; b7C; b7D;
Page 31 ~ b6; b7C; b7D;
Page 32 ~ b6; b7C;
Page 33 ~ b6; b7C;
Page 34 ~ b6; b7C;
Page 35 ~ b6; b7C;
Page 37 ~ b6; b7C;
Page 38 ~ b6; b7C;
Page 39 ~ b6; b7C;
Page 40 ~ b6; b7C;
Page 41 ~ b6; b7C;
Page 42 ~ b6; b7C;
Page 44 ~ b6; b7C; b7D;
Page 64 ~ b6; b7C; b7D;
Page 68 ~ b3; b6; b7C;
Page 69 ~ b3; b6; b7C;
Page 70 ~ b3; b6; b7C;
Page 71 ~ b3; b6; b7C;
Page 73 ~ b6; b7C; b7D;
Page 74 ~ b6; b7C; b7D;
Page 75 ~ b6; b7C; b7D;
Page 76 ~ b6; b7C; b7D;
Page 77 ~ b6; b7C; b7D;
Page 78 ~ b6; b7C; b7D;
Page 79 ~ b6; b7C; b7D;
Page 80 ~ b6; b7C; b7D;
Page 81 ~ b6; b7C; b7D;
Page 82 ~ b6; b7C; b7D;
Page 83 ~ b6; b7C; b7D;
```

```
Page 84 ~ b6; b7C; b7D;
Page 90 ~ b3;
Page 91 ~ b3;
Page 92 ~ b3;
Page 93 ~ b3;
Page 94 ~ b3;
Page 95 ~ b3;
Page 96 ~ b3;
Page 97 ~ b3;
Page 98 ~ b3;
Page 99 ~ b3;
Page 100 ~ b3;
Page 101 ~ b3;
Page 102 ~ b3;
Page 103 ~ b3;
Page 104 ~ b3;
Page 105 ~ b3;
Page 106 ~ b3;
Page 107 ~ b3;
Page 108 ~ b3;
Page 109 ~ b3;
Page 110 ~ b3;
Page 112 ~ b6; b7C;
Page 113 ~ b6; b7C;
Page 114 ~ b6; b7C;
Page 122 ~ Duplicate;
Page 123 ~ Duplicate;
Page 124 ~ Duplicate;
Page 125 ~ Duplicate;
Page 127 ~ b6; b7C; b7D;
Page 128 ~ b6; b7C; b7D;
Page 129 ~ b6; b7C; b7D;
Page 130 ~ b6; b7C; b7D;
Page 131 ~ b6; b7C; b7D;
Page 132 ~ b6; b7C; b7D;
Page 133 ~ b6; b7C; b7D;
Page 134 ~ b6; b7C; b7D;
```

## 

122 YOL 4 151 10140-1056

(File No.) 13.1. Lp-12: 23.10

VOL	6		•
Item	Date Filed	To be returned Yes No	Disposition
16657	3125ha		commentaria
10.58	3/4/92	1 1	Misc Cloca relating to Kein
	' ' 		Portsen pr.
1a59	3/2/92	X	notes re: Peterson (pr.
1960	1/18/40	/	oria Sun microscistoms invoices
1	部的华		Lateral Finger prints Example
1062	5/8/92		notes re: Justin Petersen (1)
1	Oside		rice redes le
1.	ધી જ્યોલ્સ	l l	original cinex + ofco 4
lab	4/20/02		oria notes le
lagu	4/20/673	,	Signed secript by S.A.
1467	4 balo		Bank Recerds concerning keeting pordown bo
(aco	abalas	7	oria nites ai
	Hadep		orig roles Re
	400102		Birth count for
, , , , ,	-Alpeilar		orig notes Re
677-	412016		orig notes le



134 Ell CAT 13-15 Fr.

	o. 1390-14-127588-10(57)	
Field File No	o. 13/2-04 -12/300 1000 1	
Serial # of C	Originating Document	
00 and File	No	
Date Receive	ed <u>2/20/92</u>	
From	KNWP"	
	(Name of Contributor)	
-	(Address of Contributor)	
Ву		
	// (Name of Special Agent)	
To Be Return	ned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No .	
of Criminal Pr	Alaterial - Disseminate Only Pursuant to Rule 6(e), Federal Rules rocedure   Yes  No	b6 b7c
Reference:	(Communication Enclosing Material)	
Description:	☐ Original notes re interview of	
Pon	of KNOP Winner form from to Genter Peterson, alea Ocors: copy of KNON 8	

3

9595 🗍 VOID	CORRECTED	For Official Use Only	
Type or machine print PAYER'S name, street address, city, state, and ZIP code	1 Rents	OMB No. 1545-0115	
Emmis Broadcasting Corp/KPWR	\$	1989	Miscellaneous
1099 N. Meridian, Suite 1197	2 Royalties	1909	Income
Indianapolis, IN 46204	\$	Statement for Recipients of	-
PAYER'S Federal identification number RECIPIENT'S identification number	3 Prizes and awards	4 Federal income tax withheld	Conv.A
	\$ 20,000.00	\$	Copy A For Interna
Type or machine print RECIPIENT'S name (first, middle last)	5 Fishing boat proceeds \$	6 Medical and health care payments \$	Revenue Service Center For Paperwork
Street address	7 Nonemployee compensation	8 Substitute payments in lieu o dividends or interest	Reduction Act
	\$	\$	instructions for
City, state, and ZIP code PANDRAMA CITY, CA 91402	9 Payer made direct sales of \$5		completing this form, see
	products to a buyer (recipient  10 Crop insurance proceeds	) for resale	Instructions for Forms 1099,
Account number (optional)	\$	<b>V</b>	1098, 5498, 1096, and W-2G.
Form 1099-MISC 36-2515832 IRS APP.  Do NOT Cut or S	Separate Forms on This Pag	Department of the Treasury	- Internal Revenue Service
22.000 0.000			
9595	CORRECTED	To Official No. O. I	b6 b7c
Type or machine print PAYER'S name, street address, city, state, and ZIP code	1 Rents	For Official Use Only OMB No. 1545-0115	270
			Adies allamana
Emmis Broadcasting Corp/KPWR 1099 N. Meridian, Suite 1197	\$	1989	Miscellaneous Income
Indianapolis, IN 46204	2 Royalties		si Si
	\$	Statement for Recipients of	
PAYER'S Federal identification number RECIPIENT'S identification number	3 Prizes and awards \$ 1,000,00	4 Federal income tax withheld \$	Copy A For Internal
Type or machine print RECIPIENT'S name (first, middle, last)	5 Fishing boat proceeds	6 Medical and health care payments	Revenue
	Nonemployee compensation	S Substitute souments in lieu	Service Center For Paperwork
Street address	7 Notiemployee compensation	8 Substitute payments in lieu or dividends or interest	Reduction Act Notice and
	\$.	\$	instructions for completing this
City, state, and ZIP code RANCHO SANTA MARGARITA, CA 9268	9 Payer made direct sales of \$5		form, see
Account number (optional)	products to a buyer (recipient)  10 Crop insurance proceeds	V/////////////////////////////////////	Instructions for Forms 1099,
Account named (optional)	\$	<i>\{\( \)</i>	1098, 5498, 1096, and W-2G.
Form 1099-MISC 38-2515832 IRS APP. Do NOT Cut or S	eparate Forms on This Pag	Department of the Treasury	Internal Revenue Service
501101 04101 0		,0	
9595 🗆 VOID	CORRECTED	<b>"</b> . O." : 111 . O .	
Type or machine print PAYER'S name, street address, city, state, and ZIP code	1 Rents	For Official Use Only OMB No. 1545-0115	
L. Y			Miscellaneous
Emmis Broadcasting Corp/KPWR 1099 N. Meridian, Suite 1197	\$ 2 Poyalties	1989	Income
Indianapolis, IN 46204	2 Royalties	Statement for	
	\$	Recipients of	
PAYER'S Federal identification number   RECIPIENT'S identification number	3 Prizes and awards \$ 1,000,00	4 Federal income tax withheld \$	Copy A For Internal
Type or machine print RECIPIENT'S name (first, middle, last)	5 Fishing boat proceeds	6 Medical and health care payments	Revenue
	\$	\$	Service Center For Paperwork
Street address	7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	Reduction Act Notice and
	\$	\$	instructions for completing this
City, state, and ZIP code VISTA, CA 92083	9 Payer made direct sales of \$5,		form, see
Account number (optional)	products to a buyer (recipient)  10 Crop insurance proceeds		Forms 1099,
	¢	V// '//////////////////////////////////	1098, 5498, 1096,

36-2515832 IRS APP.

Form 1099-MISC

Department of the Treasury - Internal Revenue Service

4. I understand and agree that I will not be entitled to receive any prizes in connection with the below contest in the event that KPWR determines either that I am not eligible to participate in the contest, or that any matter to which I have certified below is false in any material respect.

NAME OF CONTEST: BUT HOLD THURSDAY	
PRIZE WON: JWENTY Thousand Bollars	VALUED AT: \$ 20,000.
DATE WON: 10-12-89, 7:10am	
WINNER'S NAME:	
ADDRESS:	
CITY: Pandrama lity STATE: CA	ZIP: <u>41402</u>
SOCIAL SECUPITY #. PHONE #:	
EMPLOYER: WINNER'S DATE	OF BIRTH:
WINNER'S SIGNATURE:	DATE: 10/13/89
If you are under the age of 18, a parent ofollows:  I certify and agree to the terms and conditions Certificate stated above for and on behalf of the althe parent or guardian.	be book s of the Contest Winner's
(Signature of Parent or Guardian) (Da	te of Signature) .
Return signed form to Advertising Promotion Boundary Dlive, 8th Floor, Burbank, CA 915	KPWR Radio, 2600 West
<pre><pwr-fm broadcasting="" emmis="" pre="" witness<=""></pwr-fm></pre>	
Notes:	

ye here of secon

## KPWR, INC. CONTEST WINNER'S CERTIFICATE PAGE 2-2-2

I understand and agree that I will not be entitled to receive any prizes in connection with the below contest in the event that KPWR determines either that I am not eligible to participate in the contest, or that any matter to which I have certified below is false in any material respect.

NAME OF CONTEST: Brithday Shursday	
PRIZE WON: Instroved Dollars	VALUED AT: \$ 10,000,
DATE WON: 09-28-89, 710am	
WINNER'S NAME: DOM DWA	-
ADDRESS: 1321 M Wilcox, apt-217	<del></del>
CITY: LOS Angello STATE: CA	zip: 90028
social security #: <u>546 -85-0266</u> phone #: <u>213</u>	851-9129
EMPLOYER: MOTU. WINNER'S DATE O	of birth: <u>05-19-62</u> 0
WINNER'S SIGNATURE: Denne Den	DATE: <u>09-28-89</u>
If you are under the age of 18, a parent or follows:	guardian must sign as
I certify and agree to the terms and conditions of Certificate stated above for and on behalf of the above the parent or guardian.	of the Contest Winner's ve person, of whom I am
(Signature of Parent or Guardian) (Date	of Signature)
Return signed form to Advertising Promotion Pepartment Olive, 8th Floor, Burbank, CA 9150	, KPWR Radio, 2600 West
KPWR-FM/Emmis Broadcasting Witness	
Notes: 01#8837	-

Type or machine print PWEPS name, street address, cby, state, and ZIP code   1 Rests   1989   Miscellaneous   1099 N. Men't dian's Suites 1197   Republies   2 Republies   1988   Statement for Recipients of   1988   Recipients o	9595 🗀 VOID	CORRECTED	For Official Use Only		
Income   I			<del></del>		
Indianapolis   Indi	Emmis Dusadesetias Caus (VDIII)	\$	4000	Miscellaneous	
Secular and confidence and the Experimental Secular and anomals   Secular and security and secular and security and se	1		1909	Income	
S	Indianapolis, IN 46204	\$			
Revenue South annual RECIPIENT'S name (first, middle, tast)    Statishing boat proceeds   Statishing boayments in lieu of Recipients of Interest   Statishing boayments in lieu of Recipients of Revenue   Statishing boayments   Statement for Recipients of Revenue   Statement for Recipients   Statement for Revenue   Sta	PAYER'S Federal identification number   RECIPIENT'S identification number	1.			
Service Center For Paperwood Substitute payments in lieu of dividends or interest Motice and Completing this C	Type or machine print RFCIPIENT'S name (first_middle_last)		<u></u>		
Street additions of interest   Reduction Act	,	1		Service Center	
S   S   Clty, state, and ZIP code   9 Payer made direct sales of \$5,000 or more of consumer   Completing this   Comple	Chrostoddess	7 Nonemployee compensation		Reduction Act	
Second number (optional)   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for Form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for form 1099-MISC   Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale   Instructions for completing this consumer products to a buyer (recipient) for resale   Instructions for completing this consumer products to a buyer (recipient) for resale   Instructions for completing this consumer products to a buyer (recipient) for resale   Instructions for completing this consumer products to a buyer	Street audiess	\$	\$	instructions for	
Account number (optionar)    10 Crop Insurance proceeds   \$   \$   \$   \$   \$   \$   \$   \$   \$	•	· · · · · · · · · · · · · · · · ·	<del></del> -	form, see	
Form 1099-MISC    Season   Sea			tor resale	Forms 1099.	
PS 95 VOID CORRECTED For Official Use Only  Type or machine print PAYER'S name, street address, city, state, and ZIP code 1 Rents	Account number (optionary	1	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
Type or machine print PAYER's name, street address, city, state, and ZIP code  Emmis Broadcasting Corp / K PWR 1099 N. Merridian; Suite 1197 Indianapolis; IN 46204  PAYER's Federal Identification number   RECIPIENT'S Identification number   Statement for Recipients of    PAYER's Federal Identification number   RECIPIENT'S Identification number   Statement for Recipients of    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale    Form 1099-MISC   Sales   Sales   Sales    Payer or machine print RECIPIENTS name, street address, city, state, and ZIP code    Payer Sales and wards   Sales   Sales    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS name (first, middle, fast)    Payer or machine print RECIPIENTS n		eparate Forms on This Pag	Department of the Treasu	ry - Internal Revenue Service	
Type or machine print PAYER's name, street address, city, state, and ZIP code  Emmis Broadcasting Corp / KPWR 1.099 N. Menidian, Suite 1197 Indianapolis, IN 46204  Statement for Recipients of  PAYER'S Federal identification number   RECIPIENT'S Identification number   Sibility   Sibili	50	<b></b>	•		
Type or machine print PAYER's name, street address, city, state, and ZIP code  Emmis Broadcasting Corp / KPWR 1.099 N. Menidian, Suite 1197 Indianapolis, IN 46204  Statement for Recipients of  PAYER'S Federal identification number   RECIPIENT'S Identification number   Sibility   Sibili					
Emmis Broadcasting Corp/KPWR 1099 N. Meridian, Suite 1197 Indianapolis, IN 46204  \$		<u></u>	<del>,</del>		
Income	Type or machine print PAYER'S name, street address, city, state, and ZIP code	1 Kents	OMB No. 1545-0115	**************************************	
Indianapolis, IN 46204  Statement for Recipients of Recipients of Statement for Recipients of Revenue Statement for Recipients for Recipients for Recipients for Recipients for Revenue Statement for Recipients for Recipients for Recipients for Recipients for Recipients for Recipient		<u> </u>	1989		
### Recipients of ### Recipien		2 Royalties		,	
S		\$			
Type or machine print RECIPIENT'S name (first, middle, tast)  Street address	PAYER'S Federal identification number   RECIPIENT'S identification number				
Street address  Street address  Statement for Recipients of Service Center For Paperwork Reduction Act Notice and instructions for Forms 1099.  Account number (optional)  Payer made direct sales of \$5,000 or more of consumer for Indianapulis, IN 46204  Street address  Stroet address  S	Type or machine print RECIPIENT'S name (first, middle, last)			Revenue	
Street address \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		<u> </u>	<del> </del>	For Paperwork	
Simple continuation of the second completing this form, see Instructions for products to a buyer (recipient) for resale	Street address	7 Nonemployee compensation		Reduction Act	
Street address   Stre		\$.	\$	instructions for	
Account number (optional)  10 Crop Insurance proceeds \$ 1098, 5498, 1098, 5498, 1098, and W-2G.  Form 1099-MISC  38-2515832 IRS APP. Do NOT Cut or Separate Forms on This Page  Department of the Treasury - Internal Revenue Service  1 Rents  OMB No. 1545-0115  Emmis Broadcasting Corp/KPWR 1079 N. Meridian, Suite 1197 Indianapolis, IN 46204  EAVER'S Federal identification number   RECIPIENT'S identification number   \$ 10,7000.00   \$ 10,7000	1 '	1 '		form, see	
Form 1099-MISC  38-2515832 IRS APP. Do NOT Cut or Separate Forms on This Page  Department of the Treasury - Internal Revenue Service  Type or machine print PAYER'S name, street address, city, state, and ZIP code 1 Rents  OMB No. 1545-0115  Type or machine print PAYER'S name, street address, city, state, and ZIP code 1 Rents  OMB No. 1545-0115  Type or machine print PAYER'S name, street address, city, state, and ZIP code 1 Rents  Statement for Recipients of  Statement for Recipients of  Statement for Recipients of  Type or machine print RECIPIENT'S identification number  Type or machine print RECIPIENT'S name (first, middle, last)  Street address		Forms			
Type or machine print PAYER'S name, street address, city, state, and ZIP code  Indianapolis, IN 46204  PAYER'S Federal lidentification number   RECIPIENT'S name (first, middle, last)   Street address   Street a		·\$	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
Type or machine print PAYER'S name, street address, city, state, and ZIP code  Emmis Broadcasting Corp/KPWR 1079 N. Meridian, Suits 1177 Indianapolis, IN 46204  EAYER'S Federal identification number   RECIPIENT'S identification number   \$10,000.00  \$		eparate Forms on This Pag	Department of the Treasure	ry - Internal Revenue Service	
Type or machine print PAYER'S name, street address, city, state, and ZIP code  Emmis Broadcasting Corp/KPWR 1079 N. Meridian, Suits 1177 Indianapolis, IN 46204  EAYER'S Federal identification number   RECIPIENT'S identification number   \$10,000.00  \$					
Type or machine print PAYER'S name, street address, city, state, and ZIP code  Emmis Broadcasting Corp/KPWR 1079 N. Meridian, Suite 1177 Indianapolis, IN 46204  EAYER'S Federal identification number   RECIPIENT'S identification number   \$10,000.00  \$	9595 🗀 VOID	CORRECTED	For Official Use Only		
Indianapolis, IN 46204  PAYER'S Federal identification number   RECIPIENT'S identification number   Statement for Recipients of    PAYER'S Federal identification number   RECIPIENT'S identification number   \$ - 0.00		1 Rents			
Indianapolis Indianapolis IN 46204  PAYER'S Federal identification number   RECIPIENT'S identification number   \$ Statement for Recipients of   \$ Payer machine print RECIPIENT'S name (first, middle, last)   \$ Fishing boat proceeds   \$ Substitute payments in lieu of dividends or interest   \$ Street address   \$ \$ \$ Substitute payments in lieu of Notice and instructions for completing this form, see LOS ANGELES, CA 90028   \$ Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale	Emmis Properties Corn // PMP	<b>4</b>	4000	Miscellaneous	
## Recipients of    PAYER'S Federal identification number   RECIPIENT'S identification number   3-Prizes and awards   4 Federal income tax withheld   5   10 , 000 , 00   \$   For Internal   Revenue   Service Center   7   Nonemployee compensation   8 Substitute payments in lieu of dividends or interest   Street address   \$   \$   \$   \$   \$   \$   \$   \$   \$			1903	Income	
PAYER'S Federal identification number   RECIPIENT'S identification number   S-Prizes and awards   S-Prizes and	Indianapolis, IN 46204				
S 10,000.00   S   For Internal Revenue	PAYER'S Federal identification number   PECIDIENT'S identification number			Conv A	
\$ \$ \$ Service Center  7 Nonemployee compensation 8 Substitute payments in lieu of dividends or interest		1	•	For Internal	
To Nonemployee compensation  Street address  Street address  City, state, and ZIP code LDS ANGELES 2 CA 90028  Account number (optional)  To Nonemployee compensation  8 Substitute payments in lieu of dividends or interest  Notice and instructions for completing this form, see Instructions for Forms 1099, 100 Crop insurance proceeds  10 Crop insurance proceeds    Substitute payments in lieu of dividends or interest   Notice and instructions for completing this form, see Instructions for Forms 1099, 1098, 5498, 1096,	Type or machine print RECIPIENT'S name (first, middle, last)	1.			
Street address  \$ Street address  \$ \$ City, state, and ZIP code LDS ANGELES, CA 90028  Account number (optional)  \$ Idividends or interest Notice and Notice and instructions for completing this form, see Instructions for Park Instructions for	<b></b>	<u> </u>	8 Substitute payments in lieu	For Paperwork	
City, state, and ZIP code  LDS ANGELES CA 70028  Account number (optional)  Payer made direct sales of \$5,000 or more of consumer form, see Instructions for Forms 1099, 1098, 5498, 1096,	Street address			Notice and	
LOS ANGELES 7 CA 90028 products to a buyer (recipient) for resale	City state and 7IP code			completing this	
Account number (optional) 100 Crop insurance proceeds (////////////////////////////////////		products to a buyer (recipient) for resale Instructions for			
	Account number (optional)		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	/// 1098, 5498, 1096,	

Form 1099-MISC

36-2515832 IRS APP.

Department of the Treasury - Internal Revenue Service

Field File No. 1396-127588-1458.	
Serial # of Originating Document	
OO and File No.	
Date Received	
From LAND	
(Name of Contributor)	
(Address of Contributor)	
Ву	
(Name of Special Agent)	
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No	
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☑ No  Title:	
/	be
	b7
Reference:	
(Communication Enclosing Material)	
Description: ☐ Original notes re interview of	
Misc downts relating to levin	
Mire downts relating to levin	
en some of	/
Francisco la Lando	

Field File No. 139(-19-127588 1A59
Serial # of Originating Document
OO and File No.
Date Received 3/10/92
(Name of Contributor)
(Name of Continuitor)
(Address of Contributor)
Ву
To Be Returned □ Yes □ No Receipt Given □ Yes □-No
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☐ No. `.
Title: Custon Lettrson
Reference:(Communication Enclosing Material)
Description: Original notes re interview of

1,12 on

b6 b7С

	:	!	677	10 (60)
Field File No.	1390	- 1A - 12	2588	-1010
Serial # of Origin	ating Docume	ent		
OO and File No.				
<b>Date Received</b>	3/4/	197.		
From	Sun /	Micro 50	iskerens	
	(Name	of Contributor)		•
	(Addres	s of Contributor	')	-
Ву			<i>;</i> .	ď
To Be Returned	] Yes □ No	Receipt Give	•	] No
Grand Jury Materia of Criminal Proced	ıl - Disseminate ure □ Yes □	Only Pursuant	to Rule 6(e),	Federal Rules
Title:	fin 1	Merso	in in	
Reference:	(Comm)	unication Enclos	ina Matarial	· .
,	(001111110			
Description: 0	Original notes r	e interview of		
Sun m	n/(1/8545)	lins 100	Solles	Western person and an experience of the second
regarding	3 pin	-devel l	agent	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
lyngm		1		Misson

3

				BILL OF LADING	HEMITTANCE TO	OTAL CTNS DESC. OF ARTICLE: SPEC.		TOTAL WT.
CIII			e ennen renue nien tütt patiti billb ihil li	SHIPPED FROM	1 EB10	NMFC it. 116030 Sub 1 MACHINES, SYSTEMS.	, OR DEVICES	\$ A
MOUN'	GARCIA AVENUE NTAIN VIEW, CA. 94043	159069		10.	SHPMT, NO. PAGE	- 4		
microsystems 415 96	7 - 26939 60-1300	20	برست مسلم مسلم بالمارة المراق ( المراق ( المراق ) 14:22 Thu Mar 5 14:22	: 19 SHIP VIA REQUESTED		MUST SHIP	TODAY	ie.
10,11	N MICRÚ	SHIP TO ID #. 006	100 Har 2 14-22	FEDX 2-DAY AIR	2	,		-
0086898	•			SHIP VIA	'	TOTAL CARTONS SHIPPED	TOTAL SHIP WEIGHT	
	4.	LOS ANGELES	CA .	FEDX 2-DAY AT		REQUIRED MODE-SERVICE TYPE:		
J 17117C1CHAES.C.	CA	USA	90024 310607-2406	TEARHIER BILL OF EXDINGRAING.	03/05/92	SURFACE	AIR DEF	UPS
ı	90025			F.O.B. FREIGHT CH		AIR PRIORITY	OTHER	
			•	1	AND AUD	AIR STANDARD		
	38.		•	EXPORT LIC. NO. ,	PORT LIC. EXPIRATION -	FEDX 2-DE	AY AIR	
				SHIPMENT	ID NO.	CARRIER NAME		
			•		Si	SPECIAL INSTRUCTIONS (FOR CAR	RIER)	
ISTRIBUTION SPECIAL INS	TRUCTIONS:					CARRIER: DO N		i <sup>.</sup>
AND THE PROPERTY OF THE PROPER	<del></del>						PALL'ET.	.•
A STATE OF THE STA	4.5 %	49	*	<u> </u>			UIDUAL S ARE NOT	,
							ELED.	
						にHロに	<u>. ににい・</u>	
	PURCHASE ORDER NO.	LOONTR	ACT NO	NET 30 DAYS				٠.
	T PÜRCHASE ÖRDER NO.	ICONTR	act No			(2) PALL	LET(S)	٠.
The state of the second				NET 30 DAYS	OTY QTY NEW QTY	② PALL CONS	LET(S) BISTING OF	٠.
IE CLIN SS PS PRODUC	PURCHASE ORDER NO.	DESCRIPTION	MFG. PART NUMBER	NET 30 DAYS	RD. SHIPPED BACK ORD.	PALL CONS (10) PIEC	LET(5) BISTING OF CES.	·.
EM SENT SS SS	CT NUMBER	DESCRIPTION	MFG. PART NUMBER	SERIAL NUMBER BOX CURR. THIS O	RD. SHIPPED BACK ORD.	② PALL CONS	LET(5) BISTING OF CES. BY:	EE SPECIAL INS
E CLIN SS PS PRODUC	CT NUMBER		MFG. PART NUMBER	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	PALL CONS (IO P) EC  FREIGHT CHARGES TO BE PAID E (SHIPPER)  (CONSIGN	ET(5) SISTING OF CES.  BY:  MEE)   BILL SRD PARTY (SE	
M SEM	CT NUMBER	DESCRIPTION	MFG. PART NUMBER	SERIAL NUMBER BOX CURR. THIS O	1 0	FREIGHT CHARGES TO BE PAID E PREPAID CONSIGN  The property described above in apparent go of packages unknown), marked, consigned.	ET(5)  SISTING OF  CES.  BY:  DED  BILL 3RD PARTY (SE  Good order, except as noted (contents and and destined as indicated below, which  and destined as indicated below, which	d condition of cont h said carrier the
EM SEIN SS	CT NUMBER -32-P43 32MB	DESCRIPTION	MFG. PART NUMBER	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	FREIGHT CHARGES TO BE PAID E PREPAID (SHIPPER)  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout his cor the property under the contract agrees to croute, otherwise to deliver to another carrier	ET(5)  SISTING OF  CES.  BY:  Decoder order, except as noted (contents and and destined as indicated below, which ontract as meaning any person or corporary to its, usual place of delivery at sair or the route to said destination. It is more all or any notion of said fourte to destine	d condition of cont h said carrier the ration in possessi- id destination, if of mutually agreed, ination, and as to
1 1 N 4/75FGX-	TITY 1 **	DESCRIPTION  16" COLOR-GX D	MFG. PART NUMBER  9ESKTUP  365-1130-01  600-2941-02	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	FREIGHT CHARGES TO BE PAID E PREPAID (SHIPPER) COLLECT (SHIPPER) COLLECT (CONSIGN)  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to car oute, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or ar	BY:  Open of order, except as noted (contents and and destined as indicated below, which oncert as meaning any person or corporatory to its usual place of delivery at sair or on the route to said destination. It is mer all or any portion of said route to destine any of said property, that every service any of said property, that every service the little properties.	d condition of cont h said carrier the ration in possessi- aid destination, if of mutually agreed, ination, and as to vice to be perfor- Strainth Bill of Le
1 1 N 4/75FGX-	TITY 1 **	DESCRIPTION  16" COLOR-GX D	MFG. PART NUMBER  365-1130-01 600-2841-02	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	FREIGHT CHARGES TO BE PAID E PREPAID COLLECT (SHIPPER) COLLECT (SHIPPER) COLLECT (SHIPPER) COLLECT (CONSIGN)  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to cor troute, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or ar hereunder shall be subject to all the terms a set light (1) in Uniform Freight Classificatio shipment, or (2) in the applicable motor carr	BY:  BILL 3RD PARTY (SE  BY:  BILL 3RD PARTY (SE  Good order, except as noted (contents and i, and destined as indicated below, which ontract as meaning any person or corpora carry to its, usual place of delivery at seic er on the route to said destination. It is m rer all or any portion of said route to destin any of said property, that every servi and conditions of the Uniform Domestic ion in effect on the date heroof, if this is irrier classification or tariff if this is a mot	d condition of cont h said carrier the ration in possessi id destination, if d mutually agreed, ination, and as to vice to be perior Straight Bill of Le is a rail or a rail of tor carrier shipme
1 1 N 4/75FGX-	TITY 1 **	DESCRIPTION  16" COLOR-GX D	MFG. PART NUMBER  365-1130-01 600-2841-02	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	FREIGHT CHARGES TO BE PAID E PREPAID (SHIPPER) CONSIGN  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to ce route, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or ar hereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classificatio shipment, or (2) in the applicable motor car Shipper hereby certifies that he is fam ladidig, including those on the back theree	BY:  Sound order, except as noted (contents and a land destined as indicated below, which nortract as meaning any person or corporatory to its usual place of delivery at series on the route to said destination. It is mer all or any portion of said for oute to destinate and conditions of the Unitom Domestic ion in effect on the date hereof, it this is rrier classification or tariff it this is a mot milliar with all the terms and condition of, set forth in the classification or tariff a said terms and condition of the said terms and condition or terms.	d condition of con h said carrier the ration in possessi ind destination, if c mutually agreed, ination, and as to vice to be perfo Straight Bill of L is a rail or a rail stor carrier shipme ms of the said tr
1 N 4/25FGX- **TOTAL QUAN	TTTY 1 **  NURTH	DESCRIPTION  16" COLOR-GX D	MFG. PART NUMBER  365-1130-01 600-2941-02  11RY KIT 595-2307-01 855-1492-02	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	TREIGHT CHARGES TO BE PAID E PREPAID (CONSIGN)  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to carroute, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or a thereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classification shipment, or (2) in the applicable motor carrishipper hereby certifies that he is fam.	BY:  Description of the superior of the superi	d condition of con h said carrier the ration in possessi and destination, if mutually agreed, ination, and as to wice to be performed in the performance of the said by agreed to by agreed to by the said by the said by agreed to by the said by agreed to by the said by the said by agreed to by the said by the said by agreed to by the said
1 N 4/25FGX-	TTTY 1 **  NURTH	DESCRIPTION  16" COLOR-GX D  AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2941-02  11RY KIT 595-2307-01 855-1492-02	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	FREIGHT CHARGES TO BE PAID E PREPAID COLLECT (SHIPPER) CONSIGN  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to crute, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or ar hereunder shall be subject to all the terms a set törth (1) in Uniform Freight Classified shipment, or (2) in the applicable motor car Shipper hereby certifies that he is fam lading, including those on the back therec transportation of this shipment and the shipper and accepted for himself and his	BY:  Description of the value of the shape of the condition of the shape of the condition o	d condition of con h said carrier the ration in possession destination, it commutually agreed, intation, and as to vice to be performed to the performed to the carrier shipmes must of the said h riff which govern show agreed to by those of applicable elivered to the consignor sha
1 1 N 4/75FGX-	CT NUMBER -32-P43 32MB -3177 1 ** NURTH	DESCRIPTION  16" COLOR-GX D  1 AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2841-02  MRY KIT  595-2307-01 855-1482-02	SERIAL NUMBER BOX CURR. THIS OF THIS O	1 0	FREIGHT CHARGES TO BE PAID E  PREPAID  CONS  COLECT  (SHIPPER)  COLLECT  (SHIPPER)  COLLECT  (CONSIGN  CONSIGN  CONSIGN	BY:  DOOD order, except as noted (contents and and destined as indicated below, which ontract as meaning any person or corpora carry to its, usual place of delivery at said er on the route to said destination. It is mer all or any portion of said route to destination or tarry and conditions of the Uniform Domestic from in effect on the date hereof, if this is rirer classification or tarriff if this is a mot milliar with all the terms and conditions of the Uniform Domestic for in effect on the date hereof, it this is rirer classification or tarriff if this is a mot milliar with all the terms and conditions are hered as assigns.  Subject to Section 7 of Condition or tarriff in the classification or tarries and conditions are hered as assigns.  Subject to Section 7 of Condition or tarries and conditions are hered to assign the collowing statement. The carrier shall not make de without payment of freight and all without payment of freight and all without payment of freight and all of the conditions.	d condition of cot h said carrier the ration in possess and destination, if mutually agreed, interest of the condition of the
1 N 4/75FGX- **TOTAL QUAN	CT NUMBER -32-P43 32MB -3177 1 ** NURTH	DESCRIPTION  16" COLOR-GX D  AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2941-02  11RY KIT 595-2307-01 855-1492-02	SERIAL NUMBER BOX CURRATHIS OF THIS OF	1 0	FREIGHT CHARGES TO BE PAID E  PREPAID  PREPAID  CONSIGN  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout his cor the property under the contract agrees to cor the property under the contract agrees to cor the cherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or a thereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classification shipment, or (2) in the applicable motor car Shipper hereby certifies that he is fam lading, including those on the back there transportation of this shipment and the shipper and accepted for himself and his	BY:  BILL 3RD PARTY (SE  BY:  BILL 3RD PARTY (SE  BILL 3RD PARTY (	d condition of con h said carrier the ration in possess in destination, if mutually agreed, interest of the condition of the
1 N 4/25FGX- **TOTAL QUAN  1 N X3U0W  **TOTAL QUAN  2 1 N X660W	TTTY 1 **  NUNTH	DESCRIPTION  16" COLOR-GX D  H AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2841-02  MRY KIT  595-2307-01 855-1482-02	SERIAL NUMBER BOX CURR. THIS OF THIS O	1 0	FREIGHT CHARGES TO BE PAID E PREPAID  PREPAID  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to crute, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or at hereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classification shipment, or (2) in the applicable motor carr Shipper hereby certifies that he is fam lading, including those on the back therec transportation of this shipment and the shipper and accepted for himself and his  NOTE - Where the rate is dependent on shippers are required to state specifically in ing the agreed or declared value of the prop	BY:  DOOD order, except as noted (contents and a and destined as indicated below, which ontract as meaning any person or corporarry to its usual place of delivery at said er on the route to said destination. It is refer and conditions of the Uniform Domestic and conditions of the Uniform Domestic ion in effect on the date hereof, it this is a motivaried as a said terms and conditions of the Uniform Domestic ion in effect on the date hereof, it this is a motivaried, said terms and conditions of the Uniform Domestic ion in effect on the date hereof, if this is a motivaried, set forth in the classification or tariff it his is a motivation of the Uniform Domestic ion in the classification or tariff it his is a motivated in written and conditions are herein and conditions are herein and conditions.  Subject to Section 7 of Condition in value, in written and conditions are herein and conditions are herein and conditions.  The carrier shall not make de without payment of freight and all topperty is the conditions and the conditions are herein and conditions.	d condition of co h said carrier the ration in possess id destination, if mutually agreed interestination, and as to vice to be perf Straight Bill of is a rail or a rail for carrier shipm ms of the said riff which gover bely agreed to ! thous of applicable elivered to the cor, the consignor sh selivery of this st other lawful charge.
1 N 4/25FGX- **TOTAL QUAN  1 N X3U0W	TTTY 1 **  NUNTH	DESCRIPTION  16" COLOR-GX D  1 AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2841-02  MIRY KIT  595-2307-01 855-1482-02  595-1711-03	SERIAL NUMBER BOX CURR. THIS OF THIS O	1 0	FREIGHT CHARGES TO BE PAID E PREPAID  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to ce route, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or at hereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classification shipment, or (2) in the applicable motor carr Shipper hereby certifies that he is fam lading, including those on the back therec transportation of this shipment and the shipper and accepted for himself and his  NOTE - Where the rate is dependent on shippers are required to state specifically in ing the agreed or declared value of the prop hereby specifically stated by the shipper to	BY:  BILL 3RD PARTY (SE  BY:  BILL 3RD PARTY (SE  BILL 3RD PARTY (	d condition of co h said carrier the ration in possess id destination, if mutually agreed interest on and as to vice to be perf is a rail or a rail Straight Bill of is a rail or a rail or carrier shipt or carrier ship
1 N 4/25FGX- **TOTAL QUAN  1 N X3UOW  *TOTAL QUAN  2 1 N X660W	TTTY 1 **  NUNTH	DESCRIPTION  16" COLOR-GX D  H AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2841-02  MRY KIT  395-2307-01 855-1482-02  595-1711-03  PRINTER  365-1089-02 605-1295-02	SERIAL NUMBER BOX CURR. THIS OF THIS O	1 0	FREIGHT CHARGES TO BE PAID E PREPAID  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to ce route, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or at hereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classification shipment, or (2) in the applicable motor carr Shipper hereby certifies that he is fam lading, including those on the back therec transportation of this shipment and the shipper and accepted for himself and his  NOTE - Where the rate is dependent on shippers are required to state specifically in ing the agreed or declared value of the prop hereby specifically stated by the shipper to	BY:  DOOD order, except as noted (contents and a and destined as indicated below, which ontract as meaning any person or corporarry to its usual place of delivery at said er on the route to said destination. It is refer and conditions of the Uniform Domestic and conditions of the Uniform Domestic ion in effect on the date hereof, it this is a motivaried as a said terms and conditions of the Uniform Domestic ion in effect on the date hereof, it this is a motivaried, said terms and conditions of the Uniform Domestic ion in effect on the date hereof, if this is a motivaried, said terms and conditions are hereit as assigns.  Subject to Section 7 of Condition in value, in written of the description of the Uniform Domestic in written operty.  The carrier shall not make de without payment of freight and all topperty is	d condition of a haid carrier to ration in posses in destination, mutually agree size of the possession of the said of the sai
1 N 4/25FGX- **TOTAL QUAN  1 N X3UOW  **TOTAL QUAN  1 N X660W	OT NUMBER  -32-P43 32MB  NTITY 1 **  NURTH  150MB	DESCRIPTION  16" COLOR-GX D  H AMERICAN COLIN	MFG. PART NUMBER  365-1130-01 600-2841-02  MIRY KIT  595-2307-01 855-1482-02  595-1711-03	SERIAL NUMBER BOX CURR. THIS OF THIS O	1 0	FREIGHT CHARGES TO BE PAID E PREPAID  The property described above in apparent go of packages unknown), marked, consigned, carrier being understood throughout this cor the property under the contract agrees to ce route, otherwise to deliver to another carrier each carrier of all or any of said property ove party at any time interested in all or at hereunder shall be subject to all the terms a set forth (1) in Uniform Freight Classification shipment, or (2) in the applicable motor carr Shipper hereby certifies that he is fam lading, including those on the back therec transportation of this shipment and the shipper and accepted for himself and his  NOTE - Where the rate is dependent on shippers are required to state specifically in ing the agreed or declared value of the prop hereby specifically stated by the shipper to	BY:  DOOD order, except as noted (contents and a and destined as indicated below, which ontract as meaning any person or corporarry to its usual place of delivery at said er on the route to said destination. It is refer and conditions of the Uniform Domestic and conditions of the Uniform Domestic ion in effect on the date hereof, it this is a motivaried as a said terms and conditions of the Uniform Domestic ion in effect on the date hereof, it this is a motivaried, said terms and conditions of the Uniform Domestic ion in effect on the date hereof, if this is a motivaried, said terms and conditions are hereit as assigns.  Subject to Section 7 of Condition in value, in written of the description of the Uniform Domestic in written operty.  The carrier shall not make de without payment of freight and all topperty is	d condition of a h said carrier thratton in posses and destination, mutually agree initiation, and as vice to be personal control of the said of a ratio of a policial telivered to the cr., the consignor of the consignor of the consignor of the consignor of the consignor)

b6 b7C

AUTHORIZED SIGNATURE RECIPIENT (CARRIER OR AGENT)

2550 GARCIA AVENUE MOUNTAIN VIEW, CA. 94043 TLX 37 - 26939 415 960-1300  FREIGHT PREPAID: BILL SUN MICRO  0066896  Thu Mar 5 14:22:19  USA  LOS ANGELES  CA  SHIPPED FROM EB10  SHIPPED	
REIGHT PREPAID: BILL SUN MICRO  0066896  Thu Mar 5 14:22:19 SHIP VIA REQUESTED FEDX 2-DAY AIR SHIP VIA SHIP VIA SHIP VIA FEDX 2-DAY AIR	
LOS ANGELES CA FEDX 2-DAY AIR	4
	тс
JSA 90025 310607-2406 F.O.B. FREIGHT CHARGES	92 RE
FACT PREPAY AND ADD	
950531 SHIPMENT ID NO.	CAL
DISTRIBUTION SPECIAL INSTRUCTIONS:	SPI
DI ANT   DARTIALS 2   CUSTOMER PURCHASE ORDER NO.   CONTRACT NO.   TERMS	
, NET 30 DAYS	$\supset$
CLIN SS PS PRODUCT NUMBER DESCRIPTION MFG. PART NUMBER SERIAL NUMBER OTY THIS ORD. SHIPPED BACK	OTY ORD.
2 -2	n - H
590-1152-01 CONSOLIDATED 1 2 790-4674-01 CONSOLIDATED 1 2	The
**TOTAL QUANTITY 2 **	the route
CD ROM 595-1929-05 206G0933	here set ship
The state of the s	tran ship
	NOT ship

FORM 1603 (8/89)

Universal File Case Number 1390-04-12758 - a 6
Field Office Acquiring Evidence
Serial # of Originating Document
Date Received 4/2/
From FBHH () Lab - Later 1  (Náme of Contributor)
(Address of Contributor)
By
To Be Returned  Yes  No Receipt Given  Yes  No Grand Jury Material - Disseminate Only Pursuant to Rule 6 (e) Federal Rules of Criminal Procedure   Yes  No Title:
Reference:
(Communication Enclosing Material)
Description: ☐ Original notes re interview of
Lestent Finger priests texamention pel per 119  Alar Mar

SUN MINI COMPUTER PRINCE LITH & 340-1322-011

LC# D-1013.

#4

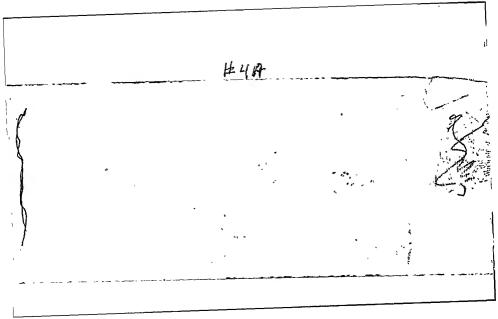
1819

3

ş

CRIME	DAT	É	CASE NO.
VICTIM	to the sales	who we will a second a	4.4.6
ADDRESS	}		
LOCATIO	N OF F.P. LI	FTS	
67	WN MIN.	· .	126.4
	V/4 M1/0	comp	UIER
	UMTNUM		
			,
FD-585	(9-24-80)	21121	•
		3/18/9	<i>j</i> 2
#1		LC# P	1413
•		LCHP	-10,5
			•
			we
		•	
	(		
ter Le	managar Militar	*^^*	10 x

F		ı
CRIME	DATE	CASE NO. LC# <i>D-</i> 1013
,	3-18-92	LC# D-1013
VICTIM		
ADDRESS		
LOCATION OF F	.P. LIFTS	
SUN Mil	vi compus	en
	TH # 340 =	
FD-585 (9-24-80	))	
#48	<i>ω</i> <	
	1	
4		



CRIME		CASE NO.
	3-18-9	2 1CH D-1013
VICTIM		
ADDRESS		
LOCATION OF F	P. LIFTS	
SUN MIN	1 Comp	UTGA
		-/322-0H
		·
FD-585 (9-24-80	))	
#44	ω	. &_
		_
·	A	,

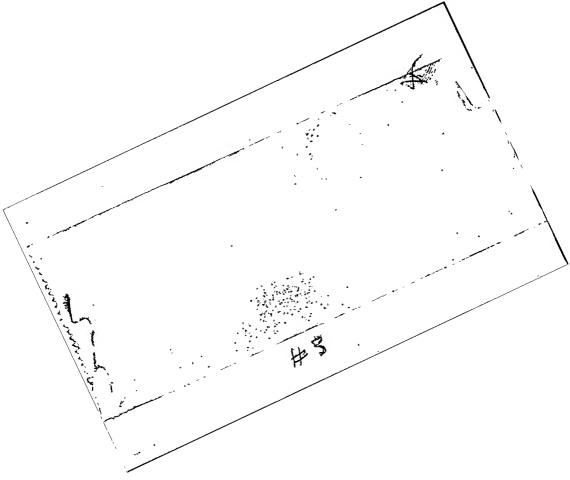
CRIME	DATE	CASE NO.
•	3-18-92	LC# 0-1013
VICTIM		·
ADDRESS		
LOCATION OF F	.P. LIFTS	
SUN M	INS Comp.	uten
Alumi	INS Comp.	PANEL
FD-585 (9-24-80		
· EJA	WEC	
•	e.	
•	1	
	•	
	•	
:		



CRIME	DATE	CASE NO.
VICTIM		
ADDRESS	,	
LOCATION C	F F.P. LIFTS	
5UN	Mini Con	mputer
	DE TOP P	
	-	
FD-585 (9-2	(4-80)	10/92
事.	2 <i>4</i>	18/92 . wei
	7	<del>/</del>
	Managan.	1.40,40,4

				-
CRIME	DATE	~~~	CASE 'N	
•	3-18:	92	LCH	D-1013
VICTIM			-	· ·
ADDRESS				
LOCATION OF F				
SUP MINI C	six PUTG	:U		.,,-
1NSiO €			VEL	
		,		
FD-585 (9-24-80	#2		WE	
•	6			
manna Maria	ing of the boson of	· · · · · .		]

Carried Spiritual Control of the Con CRIME DATE CASE NO. 3-18-92 LC# D-1013 VICTIM **ADDRESS** LOCATION OF F.P. LIFTS SUN midi Computen PANEL # WITH # 346- 1322-07/ FD-585 (9-24-80) £ 3



CASE NO. CRIME DATE CC# D-1013 VICTIM 3-18-92 ADDRESS LOCATION OF F.P. LIFTS SUN MINI COMPUTER IMENSIDE OF FRAME BELOW SWITCH FD-585 (9-24-80) .世5

Field File No. 1396-19-127588-19-62
(
Serial # of Originating Document
OO and File No.
Date Received
From Ushn fetterson
(Name of Contributor)
(Address of Contributor)
Ву
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☐ No
Title: Justin Hetersen, Il
Reference:(Communication Enclosing Material)
Description: Original notes re interview of

b6 b7C

5/8/92 c.d.

Field File No. 1344-127588 - 10(63)
Serial # of Originating Document
OO and File No.
Date Received ///9/93
From
(realise or community)
(Address of Contributor)
By
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure   No
Title: Justin Meterson.
Reference: (Communication Enclosing Material)
Description: Original notes re interview of

3/2/2 1887

Field File No. 1396-127588 - 12/64)
; v
Serial # of Originating Document
00 and File No
Date Rece
From
ddress of Contributor)
Ву
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ∑Yes □ No
Title: Junin Peterson
. b3 b6 b7
Reference:
(Communication Enclosing Material)
Description:   Original notes re interview of
Pursuant to a subporter
· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·

3

Field File No.	1376-127588 - 19(65)
Serial # of Origin	nating Document
00 and File No.	
Date Received	2/25/93.+3/1/95
From	
	(rano or communator)
	(Address of Contributor)
-	, 
Ву _	were the second of the second
To Be Returned (	□ Yes □ No Receipt Given □ Yes □ No
	ial - Disseminate Only Pursuant to Rule 6(e), Federal Rules dure ☐ Yes ☐ No
Title:	An Peterson ital
:	
Reference:	(Communication Enclosing Material)
Description:	Original notes re interview of

alpalas guzi b6 b7C

7

Field File No.	1390-29-127588: Jalle	6
Serial # of Original		
OO and File No.	my bocament	
	2/7/82	
Date Received _	5/5/75	
From	(Name of Contributor)	-
	(Maine of Contributor)	
1	(Address of Contributor)	•
	(City and State)	•
Ву	(Name of Special Agent)	•
To Be Returned 🗆	- ·	
	Too E No Hoodpt divert E 765 E 110	
Grand Jury Material of Criminal Procedur	· Disseminate Only Pursuant to Rule 6(e), Federal Rule e □ Yes □ No	S
Title:	in Mikum	
•		,
		_
Reference:	(Communication Enclosing Material)	6 7C
v	-toomination choosing wateray	-
Description: 🗆 Or	iginal notes re interview of	
•	,	,
Signed.	second by SA. for Hems used in	
SPFBI	for Hems used in	
Their case		

aut chalab.

FD-597 (Rev. 3-29-84)

## UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION

Receipt for Property Received/Returned/Released/Seized

On (date) 3/3/9.3	Page of item(s) listed below were:	-
	<ul><li>☐ Received From</li><li>☐ Returned To</li><li>☐ Released To</li><li>☐ Seized</li></ul>	
(Name) FBI San Francisco	3	
(Street Address)		
(City)		
Description of lem(s): Administrative Sew	circly Operating Gaid	- e
@ Bellore MIZAR System Ad	•	`
3 Operations - LA- North - Switchen	1 ^	_
Dervice Order Flow man	ual	
@ATT SESS Switch Manual	-	
(2) COSMOS Manual BR 753. 303.	516 -> 753.308.57	73
8 Bellove Facs Manual - Loop	Hssignment Vetern	ance
17id (9) Lock piès		
1 Lineman telephone set " but	+ set"	
D In and in the many		
(12) "The Spy Who Got Away" -		b6
The Cuckoo's Egg"		b7С b7D
(14) The Flight of the Falcon 1-		
The Falcon and the Snowman' -		
1 "Breaking the Ring"-		
(18) Military There I FO F I "		
(19) Holy (Gible W) none Kevin	Voulson'	
	,	
Received by: SA Received from		-

1390-UA-12-1588= 1966

Field File No.	134c-17-127588-10(67)
	ginating Document
00 and File N	
Date Received	7/1/6-
From	
<b>-</b>	(Address of Oblitiodiol)
	MESIN
Ву	
	(yearie of opecial Agent)
To Be Returne	d □ Yes □ No Receipt Given □ Yes □ No
Grand Jury Mat of Criminal Pro	terial - Disseminate Only Pursuant to Rule 6(e), Federal Rules cedure Yes   No
Title:	Spin Suferson
	·
Reference: _	
	(Communication Enclosing Material)
Description: [	☐ Original notes re interview of
Que	
100.0	$\Delta t \Delta$

and years

b6 b7C

b3

Field File No. 1396-64-127588 - 1268)	
Field File No.	
Serial # of Originating Document	
OO.and File No.	
Date Received 3/15 + 3/16/93	
From	
(Address of Contributor)	
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No	
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☐ No	b6
	b7C
Reference: (Communication Enclosing Material)	
Description: Original notes re interview of	
` ·	

Chig loss

Field File No. 139 c - CA - J27588 - 10 (ist)	)
Serial # of Originating Document	
00 and File No  Date Received 3/20/93  From	
(Name of Contributor)	٠
(Address of Contributor)	
By	
To Be Returned □ Yes □ No Receipt Given □ Yes □ No	
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☐ No	.b6
Title: Justin Petersen.	b7C
Reference: (Communication Enclosing Material)	
Description: View of	

ant.

= 11/27 1/c-5-5 Eysterly a. Temely-John a Internett 1390-4A-197588-1969

	56 10-1
Field File No	139C-CA-127588 -12070)
Serial # of O	riginating Document
00 and File	No
Date Receive	m lan lan
From	
	(Mame of Contributor)
	(Address of Contributor)
Ву	
	(Name of Special Agent)
To Be Return	ed ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No
-	aterial - Disseminate Only Pursuant to Rule 6(e), Federal Rules ocedure □ Yes □ No
Title:	Tustin Tanner Peterse
	SO: LA
	·
Reference:	
	(Communication Enclosing Material)
Description:	☐ Original notes re interview of
	Cath Count for March.
	. —————————————————————————————————————

ON DIME

. b6 b7C

1396-127588 ar et 3/31/93 34/263/ 13910-CH-1275818-19 70

Field File No. 139c-127588 - 16671)
rieid rile No.
Serial # of Originating Document
OO and File No.
Date Received 3/29/95
From
(Name of Contributor)
(Address of Contributor)
By
To Po Poturned II Vos. II No Receipt Given II Vos. II No.
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☐ No b6
Title: Junion Petersen
Reference: (Communication Englacing Material)
(Communication Enclosing Material)
Description: Tricinal nates interview of
Of 1099 form signal by Peters
6 / W-9 Form -1
3 / Klis Confert from Signe
by leters. May 193

3

1390-UA-BITS88-1971

ĺ	9595	☐ VOID	CORRECTED	For Official Use Only		
Type or machine print PAYER'S nam ELEVEN—FIFTY CO 6255 SUNSET BLV LOS ANGELES	RP (KIIS FM D•	/A3)	1 Rents \$ 2 Royalties \$ 3 Prizes, awards, etc. \$ 31,925.69	OMB No. 1545-0115  1990  Statement for Recipients of	liscellaneous Income	
PAYER'S Federal identification num 95-2641101  Type or machine print RECIPIENT'S MIKE PETERS/OGN	562-35-63 name (first, middle, last)	37	4 Federal income tax withheld  6 Medical and health care-payments  8 Substitute payments in lieu of dividends or interest	5 Fishing boat proceeds \$ 7 Nonemployee compensation \$ 9 Payer made direct sales of: \$5,000 or more of consumer	Copy A For Internal Revenue Service Center For Paperwork Reduction Act	
Street address 11333 MODRPARK	ST.		\$	products to a buyer (recipient) for resale ►	Notice and instructions for completing this	
City, state, and ZIP code STUDIO CITY,	CA 91602	-	10 Crop insurance proceeds \$ 12 State/Payer's state number	\$	form, see Instructions for Forms 1099 1098, 5498, and	
Account number (optional) 01-562356337		0545020 IBS ABB		Descriptions of the Treasury	W-2G	

Form 1099-MISC

36-2515832 IRS APP.

Do NOT Cut or Separate Forms on This Page

Department of the Treasury - Internal Revenue Service

Field File No. 1392 - 29-127538 - 19672
Serial # of Originating Document
OO and File No.  Date Received 3/3//93 +4/2/93
From
(Address of Contributor)
Ву
To Be Returned ☐ Yes ☐ No Receipt Given ☐ Yes ☐ No
Grand Jury Material - Disseminate Only Pursuant to Rule 6(e), Federal Rules of Criminal Procedure ☐ Yes ☐ No
Title: Justin Sefersen
Reference: (Communication Enclosing Material)
Description:

Q139193

b6 b7C